10 8000 92

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

PPC-5047-USANP.

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			34				1.1	RATE	FEË	7	RATE	FĘE	
F	OR		NUMBER FILED		NUMI	BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TO	TAL CHARGE	ABLE CLAIMS	3 4 minus 20=		•	14		X\$ 9=		OR	X\$18=	252	
IN	DEPENDENT C	LAIMS	ク in	inus 3 =	•	0	]	X43=		OR	X86=	0.	
MULTIPLE DEPENDENT CLAIM PRESEN				SENT			]	+145=		OR	+290=	0.	
* If the difference in column 1 is less than zero, enter "0" in column 2						•	TOTAL		OR	TOTAL	1022		
6	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						<u>.</u> <u></u>	SMALL	ENTITY	OR	OTHER SMALL		
<b>AMENDMENT A</b>		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 34	Minus	-3	7	=		X\$ 9= ·		OR	X\$18		
	Independent	NTATION OF M	Minus	PENDENT	S AIM			X43=	]:	OR	X86= \		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=/		
								TOTAL DDIT, FEE	1	OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		<b>.</b>	lΓ	X\$ 9=		OR	X\$18=	·	
	Independent	•	Minus	***	<u> </u>	=	$I \Gamma$	X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<b>!</b>	+145=		OR	+290=		
							<b>i.</b>	TOTAL DOIT, FEE		OR ,	TOTAL LODIT FEE		
		(Column 1)		(Colum	n 2)	(Calumn 3)			•	•	•	•	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMBI PREVIOL PAID FI	ST ER JSLY	PRESENT EXTRA			ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		<b>=</b>	╽┞	X43=			X86=		
二	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	<del></del>		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR L	+290=	·	
H	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, emer "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									DR A	DOTT. FEE		
1	ne "Highest Num	ber Previously Paid	For (Total or	Independen	d) is the	highest number	r found	in the appn	opriate box	in colu	mn 1.	.	